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## Attorney Docket Number HYG010US **DECLARATION FOR UTILITY OR** Kia Silverbrook **First Named Inventor DESIGN** COMPLETE IF KNOWN PATENT APPLICATION **Application Number** (37 CFR 1.63) Filing Date □ Declaration □ Declaration OR Submitted after Initial Submitted **Group Art Unit** Filing (surcharge (37 CFR 1.16 (e)) with Initial **Examiner Name** Filing reguired)

As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
Combined Sensing Device									
the specification of which	ı <i>(Tit</i> i	e of the Invention)							
is attached hereto									
was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as									
amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy YES	Attached?				
2003901617 2003901795	Australia Australia	April 7, 2003 April 15, 2003	0000	0000					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number	r(s) Filing Dat	Additional provision numbers are lister supplemental price PTO/SB/02B atta			ata sheet				

[Page 1 of 2]
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## DECLARATION

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.													
U.S. Parent Application or PCT Parent Number					Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)					
Additional	U.S. or F	PCT internations	al applica	ition nu	mbers a	re listed on	a supp	olementa	al priority data	sheet P	TO/SB/	02B attached I	nereto.
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in t and Trademark Office connected therewith:  Customer Number  OR  Registered practitioner(s) name/registration number listed below  Label here							omer Code						
	Nam	е		Registration Number				Name				Registration Number	
											,		
Additional :	registere	d practitioner(s)	named o	on supp	lementa	l Registere	d Pract	itioner Ir	nformation sh	eet PTO	/SB/020	attached here	eto.
Direct all correspondence to:  Customer Number or Bar Code Label  OR Correspondence address below							ress below						
Name	Kia S	Silverbrook											
Address	Silve	verbrook Research Pty Ltd											
Address	393	393 Darling Street											
City	Balm	nain State N					NSW	ZIP	2041				
Country	Austi	tralia Telephone 61-2			-9818-6633 Fax 6			61-	1-2-9555-7762				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.													
Name of Sole or First Inventor:													
Given Name (first and middle [if any])					Family Name or Surname								
KIA					SILVERBROOK								
Inventor's Signature		ling								Date	March 30, 2004		
Residence: C	lty	Balmain State NSW			NSW	C	ountry	Australi	Australia Citizenship Au			Australian	
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Post Office A	Post Office Address							-					
City	Balmain State NSW 2			ŽIP	2	2041 Country Australia			a				
□ Additional	invento	rs are being n	amod o	n the	6	nolomont		itional	Inventor(s)	-h	DTC	CD/024 -#	

## HYG010US

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## **DECLARATION**

**ADDITIONAL INVENTOR(S)** Supplemental Sheet Page 1\_\_ of \_\_\_ 1

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any	])		Family Nam					
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Inventor's Signature				Date March 30, 2004				
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Mailing Address 393 Darling Street								
Mailing Address								
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Name of Additional Joint Inventor, if ar	ıy:		A petition has been filed	for this	s unsigned inventor			
Given Name (first and middle [if any	1)		Family Name or Sumame					
Inventor's Signature Date								
Residence: City	State		Country		Citizenship			
Mailing Address								
Mailing Address	•							
City	State		ZIP	Cour	ntry			
Name of Additional Joint Inventor, if any:								
Given Name (first and middle [if any]) Family Name or Surname								
Inventor' s Signature				Date				
Residence: City State			Country		Citizenship			
Mailing Address								
Mailing Address								
City	State		ZIP	Col	untry			

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